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Fill in this information to identify your case:	
United States Bankruptcy Court for the: Northern District of: Illinois	
(State)	Chapter you are filing under:
· · · · · · · · · · · · · · · · · · ·	✓ Chapter 7 Chapter 11
	Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name	Robin First name	First name
Write the name that is on your government-issued picture identification (for example, your driver's	Middle name Johnson	Middle name
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years		
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX- 4701	
Security number or federal Individual	OR	OR
Taxpayer Identification number	9 xx - xx-	9 xx - xx-
(ITIN)		

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D	ebtor 1 Robin		Case number (if known)
	First Name	Middle Name Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		7905 S. Throop, Apt 2 Number Street	Number Street
		Chicago Illinois 60620	
		City State Zip Code	City State Zip Code
		Cook County	County
		•	
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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De	btor 1 Robin	Johnson		ase number <i>(if known)</i>	
	First Name	Middle Name Last Nam	ie		
Pa	rt 2: Tell the Court Abo	ut Your Bankruptcy Case			
	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of ear Bankruptcy (Form B2010)). Also, go to the Chapter 7 Chapter 11 Chapter 12 Chapter 13			
	How you will pay the fee	may pay with a credit card or chec I need to pay the fee in installme Individuals to Pay Your Filing Fee	pay. Typically, if you lif your attorney is such with a pre-printed ents. If you choose the in Installments (Office) (You may request the waive your fee, and rest to your family size fill out the Application.	are paying the fee ubmitting your paying address. his option, sign and icial Form 103A). his option only if your may do so only if your and you are unable.	yourself, you may pay with cash, ment on your behalf, your attorney d attach the <i>Application for</i> ou are filing for Chapter 7. By law, a our income is less than 150% of e to pay the fee in installments). If
	Have you filed for bankruptcy within the last 8 years?	Ves. District District District	When When When	IM / DD / YYYY Case IM / DD / YYYY	e number
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	V No. Yes. Debtor District Debtor District	When	Case MM / DD / YYYY Rela	tionship to you e number, if known tionship to you e number, if known
	Do you rent your residence?	No. Go to line 12. ✓ Yes. Has your landlord obtained and ✓ No. Go to line 12. — Yes. Fill out <i>Initial Statemen</i> this bankruptcy petition	nt About an Eviction Ju		want to stay in your residence?

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Debtor 1 Robin Johnson Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Robin Johnson Case number (if known)
First Name Middle Name Last Name

Pa	rt 5: Explain Your Effo	rts to Receive a Brie	fing About Credit Counseling			
		About Debtor 1:		Abo	ut Debtor 2 (Տր	oouse Only in a Joint Case):
15.	Tell the court	You must check one:		You	must check one:	
	whether you have received briefing about credit counseling.	counseling agen	ing from an approved credit ncy within the 180 days before I ptcy petition, and I received a npletion.	L d	counseling ager	ing from an approved credit ncy within the 180 days before I ptcy petition, and I received a npletion.
	The law requires that you receive a briefing		he certificate and the payment plan, veloped with the agency.			he certificate and the payment plan, veloped with the agency.
	about credit counseling before you file for bankruptcy. You must truthfully	counseling agen	ring from an approved credit ncy within the 180 days before I ptcy petition, but I do not have a mpletion.	L d	counseling ager	ing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have a npletion.
	check one of the following choices. If you cannot do so, you are not eligible to file.		er you file this bankruptcy petition, opy of the certificate and payment)		er you file this bankruptcy petition, opy of the certificate and payment
	If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your	from an approve obtain those ser made my reques	ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the	ا الله ا ا	rom an approve obtain those sen nade my reques	ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the
	creditors can begin collection activities again.	requirement, attac efforts you made t unable to obtain it	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and umstances required you to file this	r 6 1	equirement, atta efforts you made unable to obtain it	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this
			e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy.	١		e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy.
		receive a briefing must file a certifica with a copy of the	fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed.	r r \	eceive a briefing must file a certifica with a copy of the	fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed.
			he 30-day deadline is granted only mited to a maximum of 15 days.			he 30-day deadline is granted only mited to a maximum of 15 days.
		I am not required counseling beca	d to receive a briefing about credit ause of:		am not require	d to receive a briefing about credit ause of:
		Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	1	Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	'	Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
		Active duty.	I am currently on active military duty in a military combat zone.		Active duty.	I am currently on active military duty in a military combat zone.
		about credit coun	are not required to receive a briefing seling, you must file a motion for ounseling with the court.	á	about credit cour	are not required to receive a briefing seling, you must file a motion for ounseling with the court.

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Debtor 1 Robin Johnson Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded **V** No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Robin Johnson Signature of Debtor 1 Signature of Debtor 2 Executed on _ 2/22/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Robin		Johnson	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	der Chapter 7, 11, 12	or 13 of title 11, Unite	nave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requ	ired by 11 U.S.C. §	342(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge after	an inquiry that the i	nformation in the sched	lules filed with the petition is incorrect.
attorney, you do not	•	, ,		,
need to file this page.	/s/ Amy Gerstein		Date	2/22/2017
	Signature of Attorney f	or Debtor		IM / DD / YYYY
	Amy Gerstein			
	Printed name			
	Semrad Law Firm			
	Firm name			
	20 S. Clark Street			
	Street			
	28th Floor			
	Chicago		Illinois	60603
	City		State	Zip Code
	Contact phone	3128374023	Email address	agerstein@semradlaw.com
			Illinois	<u> </u>
	Bar number		State	

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Robin		Johnson
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number (If known)			

	Check if	this	is	an
_	amende	d filir	ng	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you owr
Schedule A/B: Property (Official Form 106A/B)	#0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$5,017.00
1c. Copy line 63, Total of all property on Schedule A/B	\$5,017.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$5,936.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$48,337.00
	\$54,273.00
Your total liabilities	
Your total liabilities Part 8: Summarize Your Income and Expenses	

Part 3: Summarize Your Income and Expenses	\$2,128.67

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Debtor 1 Robin Johnson Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$2,404.05 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$11,992.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$11,992.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information to identify your o	case:			
Dalata u 1	Dahia		labasas		
Debtor 1	Robin First Name	Middle Na	Johnson ame Last Name		
Debtor 2	riotivanio	Wildale 14c	Last Name		
(Spouse, if fil	ing) First Name	Middle Na	me Last Name		
United Sta	ates Bankruptcy Court for the:	Northern	District of Illinois (State)		
Case num (If known)	ber				
Officia	I Form 106A/B				Check if this is an amended filing
Sched	dule A/B: Prope	erty			12/1
category v responsibl write your	where you think it fits best. e for supplying correct infor name and case number (if	Be as complete an rmation. If more sp known). Answer ev	t an asset only once. If an asset fits in mor d accurate as possible. If two married peo- ace is needed, attach a separate sheet to ery question. d, or Other Real Estate You Own or H	ple are filing together, both a this form. On the top of any a	are equally
		•	·		
	No. Go to Part 2	quitable iliterest il	n any residence, building, land, or similar p	roperty:	
✓					
ΙШ	Yes. Where is the property?				
			What is the property? Check all that apply.		claims or exemptions. Put
1.1	Street address, if available, or	other description	Single-family home		red claims on Schedule D: aims Secured by Property.
	,,		Duplex or multi-unit building	Current value of the	Current value of the
			Condominium or cooperative	entire property?	portion you own?
			Manufactured or mobile home		
	Number Street		Land	Describe the neture of	f vour ownership
	Number Street		Investment property	Describe the nature of interest (such as fee s	
	City State	Zip Code	Timeshare Other	the entireties, or a life	
	Only Otale	Zip Gode			emmunity property
			Who has an interest in the property? Chec one.	k (see instructions)	
			Debtor 1 only	ш	
			Debtor 2 only		
			Debtor 1 and Debtor 2 only		
			At least one of the debtors and another		
			Other information you wish to add about t	his item, such as local	
			property identification number:		
If you	own or have more than one, I	ist here:			
			What is the property? Check all that apply.		claims or exemptions. Put
1.2	Street address, if available, or	other description	Single-family home		red claims on Schedule D: aims Secured by Property.
	otroct address, if available, or	other description	Duplex or multi-unit building	Current value of the	
			Condominium or cooperative	entire property?	Current value of the portion you own?
			Manufactured or mobile home		
	Number Street		Land	December the material	£
	Number Street		Investment property	Describe the nature of interest (such as fee s	
	City State	Zip Code	Timeshare Other	the entireties, or a life	e estate), if known.
	Oity Otato	Zip Codo		Object Wilder	
			Who has an interest in the property? Checone.		ommunity property
			Debtor 1 only		
			Debtor 2 only		
			Debtor 1 and Debtor 2 only		
			At least one of the debtors and another		
			Other information you wish to add about t	his itam such as local	
			property identification number:	ino item, outil ao iteal	

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Debtor 1	Robin First Name	Middle Name	Johnson Last Name	Case number	(if known)	
1.3 Stre	et address, if available, or oth		What is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	apply.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Nun	nber Street State	Zip Code	Land Investment property Timeshare Other	_	Describe the nature of interest (such as fee s the entireties, or a life	mple, tenancy by
		[] [/ho has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and	other	Check if this is co (see instructions)	mmunity property
	the dollar value of the port ve attached for Part 1. Writ	p ion you own for a te that number he				
	Describe Your Vehicles		in annualista and although		AO la chi da carrio de isla	
you own t	hat someone else drives. If yours, trucks, tractors, sport utili	ou lease a vehicle, a	in any vehicles, whether they are also report it on Schedule G: Executor cycles	-	-	
3.1	Make Model: Year:	Chevrolet Sonic 2012	Who has an interest in the propone. Debtor 1 only	erty? Check	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> <i>nims Secured by Property.</i>
	Approximate mileage: Other information:	100000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community		Current value of the entire property? \$3175.00	Current value of the portion you own? \$3175.00
3.2	Make Model: Year:		who has an interest in the propone. Debtor 1 only		the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> hims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community instructions)		Current value of the entire property?	Current value of the portion you own?

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	Robin First Name	Middle Name	Johnson Last Name	Case number	er (if known)	
	Make Model: Year:		Who has an interest in the one. Debtor 1 only	property? Check	the amount of any secu	claims or exemptions. Poured claims on <i>Schedule</i> nims Secured by Property
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 or	nly	Current value of the entire property?	Current value of the portion you own?
			At least one of the debto			
			instructions)			
3.4	Make Model: Year:		Who has an interest in the one. Debtor 1 only	property? Check	the amount of any secu	claims or exemptions. Pured claims on Schedule ims Secured by Property
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 on	nly	Current value of the entire property?	Current value of the portion you own?
			At least one of the debto			
Exan		•	Check if this is commu instructions) er recreational vehicles, other, fishing vessels, snowmobiles,	r vehicles, and acce		
Exam	nples: Boats, trailers, motors, No Yes Make Model:	•	instructions) er recreational vehicles, other, fishing vessels, snowmobiles, Who has an interest in the one.	r vehicles, and acce motorcycle accessori	Do not deduct secured the amount of any secu	ıred claims on <i>Schedule</i>
Exam	nples: Boats, trailers, motors, No Yes Make Model: Year: Approximate mileage:	•	instructions) er recreational vehicles, other, fishing vessels, snowmobiles, Who has an interest in the one. Debtor 1 only Debtor 2 only	r vehicles, and accemotorcycle accessori	Do not deduct secured the amount of any secu Creditors Who Have Cla	claims or exemptions. Pared claims on Schedule hims Secured by Property Current value of the
Exam	nples: Boats, trailers, motors, No Yes Make Model: Year:	•	instructions) er recreational vehicles, other, fishing vessels, snowmobiles, Who has an interest in the one. Debtor 1 only	r vehicles, and accemotorcycle accessoring property? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule ims Secured by Property
4.1	nples: Boats, trailers, motors, No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year:	•	instructions) er recreational vehicles, other, fishing vessels, snowmobiles, Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is commu	r vehicles, and accemotorcycle accessorion property? Check holy and another nity property (see	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule
4.1	nples: Boats, trailers, motors, No Yes Make Model: Year: Approximate mileage: Other information: Make Model:	•	instructions) er recreational vehicles, other, fishing vessels, snowmobiles, Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor instructions) Who has an interest in the one.	r vehicles, and accemotorcycle accessoring property? Check only and another onity property (see property? Check	Do not deduct secured the amount of any secu Creditors Who Have Clas Current value of the entire property? Do not deduct secured the amount of any secu	red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule

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Debtor 1 Robin Johnson Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Furniture & Goods \$525.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Electronics \$350.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$675.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Misc. Jewelry \$125.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1675.00 for Part 3. Write that number here

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Debtor 1 Robin Johnson Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$66.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$100.00 17.1. Checking account: CitiBank 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: NetSpend Prepaid <u>\$1</u>.00 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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Deb ⁻	tor 1 Robin		Johnson	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments	orate bonds and other negotia include personal checks, cashiers ents are those you cannot transfe	checks, promissory note	es, and money orders.	
	✓ No				
	Yes. Give specific information about	Issuer name:			
	them				
21.	Retirement or pension Examples: Interests in IF), thrift savings accounts,	or other pension or profit-sharing plans	
	✓ No	Type of account:	Institution name:		
	Yes. List each account	401(k) or similar plan:	mattation name.		
	separately.	Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			. ———
22.	Security deposits and				
	Your share of all unused	deposits you have made so tha with landlords, prepaid rent, publ			
	✓ No		Institution name:		
	Yes	Electric:			
		Gas:			
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			·
		Rented furniture:			·
		Other:			·
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or for	a number of years)	
	✓ No	Issuer name and description:			
	Yes				
		-			,

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Debt	or 1 Robin		mber (if known)	
24.	First Name	Middle Name Last Name an education IRA, in an account in a qualified ABLE program, or under a qualifie	d state tuition program	
24.		530(b)(1), 529A(b), and 529(b)(1).	u state tuition program.	
	✓ No			
	Yes	Institution name and description. Separately file the records of any interests.11 U.S.C.	§ 521(c):	
25.		able or future interests in property (other than anything listed in line 1), and rig	nts or powers	
	exercisable f	for your benefit		
	✓ No	. 4		1
	Yes. Desc	cribe		
				1
26.		vyrights, trademarks, trade secrets, and other intellectual property ernet domain names, websites, proceeds from royalties and licensing agreements		
	.✓ No	,		
	Yes. Desc	pribe		
27.	Licenses fra	nchises, and other general intangibles		
21.		ilding permits, exclusive licenses, cooperative association holdings, liquor licenses, pro	fessional licenses	
	✓ No			
	Yes. Desc	cribe		
Mor	ney or proper	rty owed to you?		Current value of the
Mor	ney or proper	rty owed to you?		portion you own?
Mor	ney or proper	rty owed to you?		
	ney or proper			portion you own? Do not deduct secured
				portion you own? Do not deduct secured
	Tax refunds on No Yes. Give s	wed to you specific information	Federal:	portion you own? Do not deduct secured
	Tax refunds on No Yes. Give s about your	wed to you specific information ut them, including whether already filed the returns	Federal: State:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds on No Yes. Give s about your	wed to you specific information ut them, including whether		portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds on No Yes. Give s about you a and t	specific information ut them, including whether already filed the returns the tax years	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and t	specific information ut them, including whether already filed the returns the tax years	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and t	specific information ut them, including whether already filed the returns the tax years	State: Local: ement, property settlemer	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds on ✓ No Yes. Give s about you a and t Family support Examples: Past	specific information ut them, including whether already filed the returns the tax years	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds on ✓ No Yes. Give s about you a and t Family support Examples: Past	specific information at them, including whether already filed the returns the tax years rt t due or lump sum alimony, spousal support, child support, maintenance, divorce sett	State: Local: ement, property settlemer	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds on ✓ No Yes. Give s about you a and t Family support Examples: Past	specific information at them, including whether already filed the returns the tax years rt t due or lump sum alimony, spousal support, child support, maintenance, divorce sett	State: Local: ement, property settlemer Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds on ✓ No Yes. Give s about you a and t Family support Examples: Past	specific information at them, including whether already filed the returns the tax years rt t due or lump sum alimony, spousal support, child support, maintenance, divorce sett	State: Local: ement, property settlemer Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds on ✓ No Yes. Give s about you a and t Family support Examples: Past	specific information at them, including whether already filed the returns the tax years rt t due or lump sum alimony, spousal support, child support, maintenance, divorce sett	State: Local: ement, property settlemer Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds on No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s	specific information ut them, including whether already filed the returns the tax years rt t due or lump sum alimony, spousal support, child support, maintenance, divorce sett specific information	State: Local: ement, property settlemer Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00
29.	Tax refunds on ✓ No Yes. Give s about you a and t Family suppor Examples: Past ✓ No Yes. Give s Other amount Examples: Unp	specific information at them, including whether already filed the returns the tax years rt t due or lump sum alimony, spousal support, child support, maintenance, divorce sett specific information	State: Local: ement, property settlemer Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds on No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount Examples: Unpp	specific information at them, including whether already filed the returns the tax years	State: Local: ement, property settlemer Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds on ✓ No ✓ Yes. Give s about you a and t Family suppor Examples: Past ✓ No ✓ Yes. Give s Other amount Examples: Unp Soc	specific information It them, including whether already filed the returns the tax years	State: Local: ement, property settlemer Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds on No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp Soc	specific information It them, including whether already filed the returns the tax years	State: Local: ement, property settlemer Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	otor 1 Robin	Johnson	Case number (if known)	
	First Name	Middle Name Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life	insurance; health savings account (HSA); credit,	homeowner's, or renter's insurance	
	Yes. Name the insurance com of each policy and list its value		Beneficiary:	Surrender or refund value:
32.	If you are the beneficiary of a living property because someone has di	due you from someone who has died g trust, expect proceeds from a life insurance pol ed.	icy, or are currently entitled to receive	
	Yes. Describe			
33.	Examples: Accidents, employment	nether or not you have filed a lawsuit or mad t disputes, insurance claims, or rights to sue	e a demand for payment	
	Yes. Describe			
34.	Other contingent and unliquida to set off claims	ited claims of every nature, including counte	rclaims of the debtor and rights	
	✓ No ☐ Yes. Describe			
35.	Any financial assets you did not	t already list		
	Yes. Describe			
36.	-	ur entries from Part 4, including any entries ere		\$167.00
Part	5: Describe Any Business-	Related Property You Own or Have an	Interest In. List any real estate in Part	:1.
37.	Do you own or have any legal or	r equitable interest in any business-related լ	property?	
	No. Go to Part 6. Yes. Go to line 38.		p D	current value of the ortion you own? To not deduct secured claims rexemptions
38.	Accounts receivable or commis	ssions you already earned		
	Ves. Describe			
39.	Office equipment, furnishings, a Examples: Business-related comp	and supplies uters, software, modems, printers, copiers, fax r	nachines, rugs, telephones, desks, chairs, elect	ronic devices
	Ves. Describe			
			·	

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Deb	tor 1 Robin	Johnson	Case number (if known)	
	First Name	Middle Name Last Name		
40.	Machinery, fixtures, ed	quipment, supplies you use in business, and tools of your trad	e	
	✓ No			
	Yes. Describe			
				
41.	Inventory			
	✓ No			
	Yes. Describe			
	-			
42.	Interests in partnershi	ps or joint ventures		
	✓ No			
	<u> </u>	Name of entity:	% of ownership:	
	Yes. Give specific information about			
	them			
		<u> </u>		
43	Customer lists, mailing	lists, or other compilations		
	_			
	✓ No			
	Yes. Do your lists in	clude personally identifiable information (as defined in 11 U.S.C. §	101(41A))?	
	☐ No			
	Yes. Descr	ihe		
	163. B636			
44.	Any business-related (property you did not already list		
	No			
	Yes. Give specific information			
	imomation			
				
		-		
45. A	dd the dollar value of a	II of your entries from Part 5, including any entries for pages	you have attached	
		r here		
<u> </u>	Describe Acces		<u> </u>	
Pari		nrm- and Commercial Fishing-Related Property You Cinterest in farmland, list it in Part 1.	Dwn or Have an Interest In.	
46.	Do you own or have a	ny legal or equitable interest in any farm- or commercial fishi		
	No. Go to Part 7.			rent value of the
	Yes. Go to line 47.			tion you own? not deduct secured claims
				xemptions
47.	Farm animals			
	Examples: Livestock, po	pultry, farm-raised fish		
	√ No			
	Yes. Describe			

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Debt	or 1 Robin First Name		Johnson Last Name	Case number (if known)	 ,
48.	Crops-either growing				
	No Yes. Describe				
49.	Farm and fishing equip No Yes. Describe	oment, implements, machinery, fixtur	es, and tools of trade		
50.	Farm and fishing supp	lies, chemicals, and feed			
	No Yes. Describe				
51.	Any farm- and comme No Yes. Describe	rcial fishing-related property you did	not already list		
		l of your entries from Part 6, includin	g any entries for pages yo	ou have attached	
Part 7	Describe All Pro	perty You Own or Have an Intere	est in That You Did No	t List Above	
	Do you have other prop	perty of any kind you did not already l s, country club membership			
	✓ No				
	Yes. Give specific information				
54. A	dd the dollar value of al	l of your entries from Part 7. Write th	at number here		•
Part 8		Each Part of this Form			
55. F	Part 1: Total real estate	, line 2		>	
56. p	oart 2 total vehicles, lin	e 5	\$3175.00		
57. P	art 3: Total personal ar	d household items, line 15	\$1675.00		
58. P	art 4: Total financial as	sets, line 36	\$167.00		
59. F	Part 5: Total business-re	elated property, line 45			
60. F	Part 6: Total farm- and	ishing-related property, line 52			
61. F	Part 7: Total other prop	erty not listed, line 54			
62. 1	otal personal property.	Add lines 56 through 61	\$5017.00	Copy personal property total	+ \$5017.00
63. T	otal of all property on S	chedule A/B. Add line 55 + line 62			\$5017.00

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Fill in this information to identify your case:						
Debtor 1	Robin		Johnson			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois			
			(State)			
Case number (If known)						

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Identify the Property You Clair	m as Exempt						
1.	1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.							
	You are claiming state and federal	✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)						
	You are claiming federal exemption	ns. 11 U.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A	I/B that you claim as e	exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption				
	Brief description: Chevrolet Sonic, 2012 Line from Schedule A/B: 03	\$3,175.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)				
	Brief description: Checking account, CitiBank Line from Schedule A/B: 17	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)				
3.	✓ No	ery 3 years after that for	375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case?					

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Debtor 1 Robin Johnson Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$525.00 description: V \$525.00 Misc. Household 100% of fair market value, up to any **Furniture & Goods** applicable statutory limit Line from Schedule A/B: 06 735 ILCS 5/12-1001(b) Brief description: \$1.00 **V** \$1.00 Other financial account, 100% of fair market value, up to any NetSpend Prepaid applicable statutory limit Line from Schedule A/B: 17 Brief 735 ILCS 5/12-1001(a) description: \$675.00 **✓** \$675.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 735 ILCS 5/12-1001(b) Brief \$350.00 description: \$350.00 Misc. Electronics 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$125.00 description: **✓** \$125.00 Misc. Jewelry 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 12 735 ILCS 5/12-1001(b) Brief \$66.00

\$66.00

100% of fair market value, up to any

applicable statutory limit

description:

Line from

Schedule A/B:

Cash on Hand

16

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		Do	ocument Page 22 of	73		
Fill in this infor	mation to identify your ca	se:				
Debtor 1	Robin First Name	Middle Name	Johnson Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States B		Northern	District of Illinois			
Case number			(State)			
	Form 106D			_		Check if this is an amended filing
Schedu	le D: Credito	ors Who Ha	ve Claims Secur	ed by Prop	ertv	12/15
1. Do any control No. Control Yes.	number (if known). reditors have claims se	ecured by your proper	nber the entries, and attach it to rity? with your other schedules. You have	·		jes, write your
separate	ly for each claim. If more th	nan one creditor has a par	cured claim, list the creditor rticular claim, list the other creditors order according to the creditor's	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Fort Wo City Who ow Deb Charles At lea	er Street bel Marin	2012 Chevrolet Sonic As of the date you file Contingent Unliquidated Disputed Nature of lien. Check	made (such as mortgage or secured	<u>\$5,936.00</u>	\$3,175.00	\$2,761.00

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$5,936.00

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F-11 -								
HIII II	n this infori	mation to identify your c	ase:					
Deb	tor 1	Robin		Johnson				
		First Name	Middle Name	Last Name				
	tor 2							
(Spo)	use, if filing)	First Name	Middle Name	Last Name				
Unit	ed States B	ankruptcy Court for the:	Northern	District of Illinois (State)				
Case (If knd	e number own)							
Off	icial F	orm 106E/F				Che	eck if this is an	n amended filing
Sc	hedu	ıle E/F: Cre	ditors Who	Have Uns	ecured Claims			12/15
other Form clain the e know	r party to a n 106A/B) a ns that are entries in t vn).	any executory contracts and on <i>Schedule G: Exe</i> Ilisted in <i>Schedule D: C</i> he boxes on the left. At	s or unexpired leases that cutory Contracts and Une Creditors Who Hold Claims	could result in a cl expired Leases (Office Secured by Proper	laims and Part 2 for creditors wi aim. Also list executory contract ial Form 106G). Do not include a y. If more space is needed, copy the top of any additional pages,	s on <i>Sched</i> iny creditor the Part yo	ule A/B: Prop rs with partia ou need, fill i	perty (Official ally secured it out, number
1.		reditors have priority un Go to Part 2.	secured claims against y	ou?				
2.	listed, ider As much a Continuat	ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor	is. If a claim has both priorit	y and nonpriority amount ding to the creditor's particular claim, list th		both priority	y and nonprio	rity amounts.
						Total	Priority	Nonpriority

claim

amount

amount

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Debtor 1 Robin Johnson Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 AAA Financial Services \$2,000.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 15137 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 19886 Wilmington Delaware City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **V** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Payday Loan Is the claim subject to offset? Yes **ALLIANCEONE** 4.2 \$1,286.00 Last 4 digits of account number Nonpriority Creditor's Name 1684 WOODLANDS DR STE 15 When was the debt incurred? 6/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 43537 MAUMEE Ohio City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ Nipsco Utility Bill Is the claim subject to offset? **✓** No Yes 4.3 American InfoSource LP (agent for US Cellular) \$2,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 248838 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 73124 Oklahoma City Oklahoma City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only **✓** Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ US Cellular Bill Is the claim subject to offset? **✓** No Offician Yes Schedule E/F: Creditors Who Have Unsecured Claims page 2

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Debtor 1 Robin Johnson Case number (if known) Last Name

Part 2	Your NONPRIORITY Unsecured Claims - Continuat	ion Page	
	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.4	ATLANTIC CRD Nonpriority Creditor's Name P O BOX 13386 Number Street	Last 4 digits of account number 7419 When was the debt incurred? 12/1/2013 As of the date you file, the claim is: Check all that apply.	\$1,014.00
	ROANOKE Virginia 24033 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify GE Capital Credit Card	
4.5	Brother Loan Nonpriority Creditor's Name 5100 W. 14th St. Number Street Cicero Illinois 60804 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes	When was the debt incurred?	\$2,000.00
4.6	CBE GROUP Nonpriority Creditor's Name 131 TOWE PARK DR SUITE 1 Number Street WATERLOO lowa 50702 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 4091 When was the debt incurred? 10/1/2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Comcast Cable Bill	\$549.00

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Debtor 1 Robin Johnson Case number (if known) Last Name

Part 2	Your NONPRIORITY Unsecured Claims - Continuation	on Page	
	After listing any entries on this page, number them beginning v	with 4.5, followed by 4.6, and so forth.	Total claim
4.7	Commonwealth Edison Nonpriority Creditor's Name 3 Lincoln Ctr FI 4 Number Street	Last 4 digits of account number When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. Contingent	\$4,000.00
	Oakbrook Ter Illinois 60181 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Electric Bill	
4.8	CREDIT MANAGEMENT LP Nonpriority Creditor's Name 4200 INTERNATIONAL PKWY Number Street CARROLLTON Texas 75007 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes	Last 4 digits of account number 6260 When was the debt incurred? 6/1/2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Comcast Central Warehouse Bill	\$507.00
4.9	CREDIT MANAGEMENT LP Nonpriority Creditor's Name 4200 INTERNATIONAL PKWY Number Street CARROLLTON Texas 75007 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	When was the debt incurred? 7/1/2011 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify WOW Bill	\$316.00

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Debtor 1 Robin Johnson Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 \$325.00 Last 4 digits of account number Nonpriority Creditor's Name 1112 7TH AVE POB 2816 When was the debt incurred? 11/1/2012 Number As of the date you file, the claim is: Check all that apply. Contingent MONROE Wisconsin 53566 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ CreditCard Is the claim subject to offset? **✓** No Yes 4.11 **HARRIS** \$365.00 Last 4 digits of account number 7800 Nonpriority Creditor's Name 111 WEST JACKSON B SUITE 400 When was the debt incurred? 11/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated CHICAGO 60604 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ Peoples Gas Bill Is the claim subject to offset? **✓** No Yes HARVARD COLLECTION 4.12 \$407.00 Last 4 digits of account number 1220 Nonpriority Creditor's Name 4839 ELSTON AVE When was the debt incurred? 6/1/2011 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **CHICAGO** 60630 Illinois Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify **Englewood Gardens** Is the claim subject to offset?

✓ No Yes

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Debtor 1 Robin Johnson Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Holy Cross Hospital \$2,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 2701 W 68th St Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60629 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ Medical Bill Is the claim subject to offset? **✓** No Yes I C SYSTEM INC 4.14 \$658.00 5449 Last 4 digits of account number ___ Nonpriority Creditor's Name 1/1/2016 PO BOX 64378 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated SAINT PAUL Minnesota 55164 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Direct TV Bill Is the claim subject to offset? **✓** No Yes KOMYATTECASB 4.15 \$381.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 6/1/2014 9650 GORDON DRIVE Number Street As of the date you file, the claim is: Check all that apply. Contingent **HIGHLAND** Indiana 46322 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No

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Debtor 1 Robin Johnson Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 KOMYATTECASB \$364.00 Last 4 digits of account number Nonpriority Creditor's Name 9650 GORDON DRIVE When was the debt incurred? 5/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent **HIGHLAND** Indiana 46322 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No Yes 4.17 KOMYATTECASB \$102.00 Last 4 digits of account number 6328 Nonpriority Creditor's Name 9650 GORDON DRIVE When was the debt incurred? 11/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent **HIGHLAND** Indiana 46322 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No Yes Sprint 4.18 \$3,000.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 219554 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Kansas City Missouri 64121 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Cell Phone Bill Is the claim subject to offset? **✓** No

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Debtor 1 Robin Johnson Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 St Catherine's Hospital \$3,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 4321 Fir St Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 46312 Indiana City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ Medical Bill Is the claim subject to offset? **✓** No Yes 4.20 TCF - Corporate \$2,500.00 Last 4 digits of account number _ Nonpriority Creditor's Name 1405 Xenium Ln N Ste 180 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Minneapolis Minnesota 55441 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Is the claim subject to offset? **✓** No Yes 4.21 **TMobile** \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 742596 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Ohio 45274 Cincinnati City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ____ Cell Phone Bill Is the claim subject to offset? **✓** No

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Debtor 1 Robin Johnson Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 TRUST REC SV \$571.00 Last 4 digits of account number Nonpriority Creditor's Name 541 OTIS BOWEN DRI When was the debt incurred? 3/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent **MUNSTER** Indiana 46321 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: MEDICAL **✓** No Yes 4.23 U S DEPT OF ED/GSL/ATL \$9,124.00 Last 4 digits of account number 3533 Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 1/1/2008 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 30301 ATLANTA Georgia City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ✓ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes U S DEPT OF ED/GSL/ATL 4.24 \$2,868.00 3852 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 1/1/2008 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ATLANTA 30301 Georgia Zip Code Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ✓ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No

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Debtor			Johnson	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NONPRIORITY U	Insecured Clain	ns - Continuation I	Page	
	After listing any entries on	this page, number	r them beginning wit	th 4.5, followed by 4.6, and so forth.	Total claim
4.25	University of Chicago Medica	l Center		Last 4 digits of account number	\$8,000.00
	Nonpriority Creditor's Name 800 E. 55th St.			When was the debt incurred? n/a	
	Number Street			As of the date you file, the claim is: Check all that apply. Contingent	
		linois State	60615 Zip Code	Unliquidated Disputed	
	Who incurred the debt? Check one. Debtor 1 only			Type of NONPRIORITY unsecured claim:	
	Debtor 2 only			Student loans	
	Debtor 1 and Debtor 2 of	nly		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debto	rs and another		Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim rela	ates to a communi	ty debt	Other. Specify Medical Bill	
	Is the claim subject to offs	et?			
	✓ No				
	Yes				

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Debtor 1 Robin Johnson Case number (If known)
First Name Middle Name Last Name

collection agency collection agency	this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a ection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the ection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional ditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.							
NIPSCO Name			On which entry in Part 1 or Part 2 did you list the original creditor?					
			Line 4.0	-f (Oh!-				
PO Box 13013 Number Street			Line 4.2	of <i>(Check</i> one):	Part 1: Creditors with Priority Unsecured Clai			
out of the out				22,.	Part 2: Creditors with Nonpriority Unsecured Claims			
Merrillville	Indiana	46411	Last 4 digits o	f account number	8385			
City	State	Zip Code						
GE Capital Retail B	Bank							
Name			On which entr	On which entry in Part 1 or Part 2 did you list the original creditor?				
PO Box 4571			Line 4.4	of (Check	Part 1: Creditors with Priority Unsecured Claims			
Number Street				one):	Part 2: Creditors with Nonpriority Unsecured			
					Claims			
Carol Stream	Illinois	60197	l act 4 digita a	f account number	7419			
City	State	Zip Code	Last 4 digits 0	. account number				
Direct TV								
Name			On which entr	y in Part 1 or Part	2 did you list the original creditor?			
PO Box 5007			Line 4.14	of (Check	Part 1: Creditors with Priority Unsecured Claims			
Number Street				one):				
					✓ Part 2: Creditors with Nonpriority Unsecured Claims			
Carol Stream	Illinois	60197	l ant 4 dimita a	f	5449			
City	State	Zip Code	Last 4 digits 0	f account number				
Comcast								
Name			On which entr	On which entry in Part 1 or Part 2 did you list the original creditor?				
p.o. box 196			Line 4.6	of (Check	Part 1: Creditors with Priority Unsecured Claims			
Number Street				one):	✓ Part 2: Creditors with Nonpriority Unsecured			
					Claims			
Newark	New Jersey	07101	Last 4 digits o	f account number	4091			
City	State	Zip Code						
Comcast								
Name			On which entr	y in Part 1 or Part	2 did you list the original creditor?			
One Comcast Cen	ter		Line 4.8	of (Check	Part 1: Creditors with Priority Unsecured Claims			
Number Street				one):	✓ Part 2: Creditors with Nonpriority Unsecured			
					Claims			
Philadelphia	Pennsylvania	19103	Last 4 digits o	f account number	6260			
City	State	Zip Code						
Englewood Garder	n Apartments							
Name			On which entr	y in Part 1 or Part	2 did you list the original creditor?			
6956 S. Vincennes	s Ave.		Line 4.12	of (Check	Part 1: Creditors with Priority Unsecured Claims			
Number Street			<u> </u>	one):	Part 2: Creditors with Nonpriority Unsecured			
					Claims			
Chicago	Illinois	60621	l act 4 digita a	f account number	1220			
City	State	Zip Code	Last 4 digits 0	i account number	1220			
Peoples Gas								
Name			On which entr	y in Part 1 or Part	2 did you list the original creditor?			
200 E. Randolph			Line 4.11	of (Check	Part 1: Creditors with Priority Unsecured Claims			
Number Street			<u> </u>	one):	H			
			<u></u>		✓ Part 2: Creditors with Nonpriority Unsecured Claims			
Chicago	Illinois	60601	 Last 4 digits o		7800			

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Debtor 1 Robin Johnson Case number (if known)

First Name Last Name Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$11,992.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$36,345.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$48,337.00 6j. Total. Add lines 6f through 6i.

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Fill in this infor	mation to identify your c	ase:			
Debtor 1	Robin		Johnson		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois (State)		
Case number			(State)		
(If known)					

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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			טט	Cument F	aye so	01 73	
Fill in	this infor	mation to identify your o	case:				
Debto	or 1	Robin		Johnson		_	
Debto	or 2	First Name	Middle Name	Last Name)		
(Spous	se, if filing)	First Name	Middle Name	Last Name)	_	
Unite	d States E	Bankruptcy Court for the:	Northern	District of Illinois		_	
	number			(State))	_	
(If knov	,	Form 106H				Check if this is amended filing	
		e H: Your Co	debtors			12	/15
the enknowr	ntries in t n). Answe	he boxes on the left. A	,	to this page. On	the top of an	is needed, copy the Additional Page, fill it out, and number on Additional Pages, write your name and case number (if	r
14	daho, Lou No. (Yes.	uisiana, Nevada, New Me Go to line 3.	lived in a community propagation, Puerto Rico, Texas, Water spouse, or legal equivalent	ashington, and Wis	sconsin.)	munity property states and territories include Arizona, California.	
		-	ty state or territory did you	live?	Fill	I in the name and current address of that person.	
		Name of your spouse,	former spouse, or legal equi	valent			
		Number Street					
		City	State	2	Zip Code		
3. I	n Column	1, list all of your code	btors. Do not include your	spouse as a code	ebtor if your	spouse is filing with you. List the person shown in line 2	

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in this information to ident	ify your case:				
	ny your odoo.	Lalara			
Debtor 1 Robin First Name	Middle Name	Johnso Last N		_ Cha	and if their in
Debtor 2					eck if this is:
(Spouse, if filing) First Name	Middle Name	Last N	ame		An amended filing
United States Bankruptcy Court	for Northern	District of Illi			A supplement showing post-petition chapter 1 expenses as of the following date:
the: Case number		(S	tate)		expenses as or the following date.
(If known)				_	MM / DD / YYYY
Official Form 106					
Schedule I: Your	Income				12/1
information about your spous	e. If you are separated and led, attach a separate she very question.	d your spous	se is not filing	with you, do	r spouse is living with you, include not include information about your ional pages, write your name and case
Fill in your employment		Debtor 1			Debtor 2
information.	Employment status				
If you have more than one job,	Employment status	Emplo	•		Employed
attach a separate page with information about additional		☐ Not Er	nployed		Not Employed
employers.	Occupation	Driver			
Include part time, seasonal, or	Employer's name	SCR Medic	cal Transportatio	n	
self-employed work.	Employer's address	Employer's address 8801 S. Greenwood Ave. Number Street			
Occupation may include studer or homemaker, if it applies.	nt				Number Street
		Chicago City	Illinois State	60619 Zip Code	City State Zip Code
	How long employed	——————————————————————————————————————		Zip Gode	Only State Zip Gode
	there?				
Part 2: Give Details Abou	t Monthly Income				
spouse unless you are separate	d. nave more than one employer,	•		•	write \$0 in the space. Include your non-filing or that person on the lines below. If you need
			For	Debtor 1	For Debtor 2 or non-filing spouse
 List monthly gross wages, deductions.) If not paid mon be. 	salary, and commissions (befo thly, calculate what the monthly		2.	\$1,690.00	
3. Estimate and list monthly of	overtime pay.		3	+ \$0.00	
4. Calculate gross income. Ac	dd line 2 + line 3.		4.	\$1,690.00	

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Debtor 1Robin	Johnson	Case number	(if	
First Name Middle Name	Last Name	known) For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$1,690.00		
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$186.33		
5b. Mandatory contributions for retirement plans	5b.	\$0.00		
5c. Voluntary contributions for retirement plans	5c.	\$0.00		
5d. Required repayments of retirement fund loans	5d.	\$0.00		
5e. Insurance	5e.	\$0.00		
5f. Domestic support obligations	5f.	\$0.00		
5g. Union dues	5g.	\$0.00		
5h. Other deductions. Specify:		\$0.00 +		
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5		\$186.33		
+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from	n line 4. 7.	\$1,503.67		
8. List all other income regularly received:				
 Net income from rental property and from operating a business, profession, or farm 	i			
Attach a statement for each property and business showin gross receipts, ordinary and necessary business expenses, the total monthly net income.	0	\$0.00		
8b. Interest and dividends	8b.	\$0.00		
8c. Family support payments that you, a non-filing spouse dependent regularly receive	e, or a			
Include alimony, spousal support, child support, maintena divorce settlement, and property settlement.	ance, 8c.	\$0.00		
8d. Unemployment compensation	8d.	\$0.00		
8e. Social Security	8e.	\$0.00		
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any no cash assistance that you receive, such as food stamps (becaunder the Supplemental Nutrition Assistance Program) or housing subsidies Specify:	n-			
Food Assistance Programs Income	8f.	\$625.00		
8g. Pension or retirement income	8g.	\$0.00		
8h. Other monthly income. Specify:	8h. +	\$0.00 +		
9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f -	+8g + 8h. 9.	\$625.00		
10.Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing	10. ng spouse	\$2,128.67	=	\$2,128.67
11. State all other regular contributions to the expenses tha Include contributions from an unmarried partner, members of friends or relatives. Do not include any amounts already included in lines 2-10 or	your household, your o	lependents, your roomn		
Specify:		, , , , , , , ,	11.	+ \$0.00
· ·				
12. Add the amount in the last column of line 10 to the amou Write that amount on the Summary of Schedules and Statistics				\$2,128.67
				Combined monthly income
13. Do you expect an increase or decrease within the year a	fter you file this form	?		
□ ''``				
Yes. Explain:	l job on 02/09/2017			

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		Docu	iment Page 39 of 73	3	
Fill in this infor	mation to identi	fy your case:			
Debtor 1	Robin		Johnson		
	First Name	Middle Name	Last Name	Check if this is:	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended fili	ng
				A supplement s	howing post-petition chapter 13
United States I	Bankruptcy Court	for the: Northern	District of Illinois (State)		the following date:
Case number				MM / DD / YYY	
				וווי / טט / ווווי	I
Official	Form 10	<u>)6J</u>			
Schedul	e J: Your	Expenses			12/1
information. If (if known). Ans					
1. Is this a jo	int case?				
✓ No. G	o to line 2				
Yes. D	oes Debtor 2 liv	e in a separate household?			
_ [No				
	Yes. Debtor 2	must file Official Forms 106J-2, Exper	nses for Separate Household of Debt	or 2.	
2. Do you hav	re dependents?	No			
Do not list [Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
			Child	10 years	No. ✓ Yes.
			Child	8 years	No.
					Yes.
			Child	4 years	☑ No. ✓ Yes.
		✓ No ☐ Yes			
		going Monthly Expenses			
Estimate you	r expenses as of of a date after t	fyour bankruptcy filing date unless yn he bankruptcy is filed. If this is a sup	•	•	-
		th non-cash government assistance cluded it on <i>Schedule I: Your Incom</i> e			Your expenses
	I or home owne or the ground or	rship expenses for your residence. In lot. 4.	clude first mortgage payments and		\$695.00
If not inc	luded in line 4:				
4a. Real e	state taxes				4a \$0.00

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

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Debtor 1 Robin Johnson Case number (if known) Last Name

		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$100.00
6b. Water, sewer, garbage collection	6b.	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$63.00
6d. Other. Specify:	6d	\$0.00
7. Food and housekeeping supplies	7.	\$625.00
8. Childcare and children's education costs	8.	\$0.00
9. Clothing, laundry, and dry cleaning	9.	\$75.00
10. Personal care products and services	10.	\$75.00
11. Medical and dental expenses	11.	\$0.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 	12.	\$60.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions and religious donations	14.	\$0.00
15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$200.00
15d. Other insurance. Specify:	15d	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.00
17. Installment or lease payments:	.0	
17a. Car payments for Vehicle 1	17a	\$220.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from		\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.Other payments you make to support others who do not live with you.		** **
Specify:	19.	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes.	20a 20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20b 20c	\$0.00
20d. Maintenance, repair, and upkeep expenses.	20d	\$0.00
20e. Homeowner's association or condominium dues	20d 20e	\$0.00
	208	φυ.υυ

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Debtor 1 Robin			Johnson	Case number (if known)		
First	Name	Middle Name	Last Name			
21.Other. Spe	ecify:				21	\$0.00
22. Calculate	your monthly expense	es.				\$2,113.00
22a. Add lii	nes 4 through 21.					\$0.00
22b. Copy	line 22 (monthly expense	ses for Debtor 2), if any,	from Official Form 106J-2			\$2,113.00
22c. Add lii	ne 22a and 22b. The res	sult is your monthly exp	enses.		22.	
23. Calculate	your monthly net inco	me.				
23a. Copy	line 12 (your combined	monthly income) from S	Schedule I.		23a	\$2,128.67
23b. Copy	your monthly expenses	from line 22 above.			23b	\$2,113.00
	, , ,	ses from your monthly ir	icome.			\$15.67
The r	esult is your monthly ne	t income.			23c	
For examp	ble, do you expect to fin	ish paying for your car lo	es within the year after year within the year or do you no diffication to the terms of	ou expect your		

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Fill in this information to identify your case:								
Debtor 1	Robin	Johnson						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	Bankruptcy Court for the:	Northern	District of Illinois(State)					
Case number (If known)	·		(State)					

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below						
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
	✓ No						
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	and schedules filed with this declaration and					
×	/s/ Robin Johnson	×					
	Signature of Debtor 1	Signature of Debtor 2					
	Date 2/22/2017	Date					
	MM/DD/YYYY	MM/DD/YYYY					

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Fill in this	s information to	identify your	case:			
Debtor 1	Robin			Johnson		
Dobtor	First Nar	ne	Middle N	ame Last Nam	е	
Debtor 2 (Spouse, if	filing) First Nar	ne	Middle N	ame Last Nam	<u>e</u>	
United St	tates Bankruptcy	Court for the	Northern	District of Illino	is	
Case nur	nber			(State	9)	
(If known)						
Offic	ial Form	107				Check if this is a amended filing
			al Affaire fo	r Individuale I	Filing for Bankruptcy	12/1
informat number	ion. If more s (if known). An	oace is need swer every o	ed, attach a sepa question.		together, both are equally responsible on the top of any additional pages, we before	
T GIT II.	GIVO BOTAILO	7 IDOUT 1 OUI	Maritar Otatao t		501010	
1. W	nat is your curr	ent marital s	tatus?			
✓	Married					
	Not married					
2. Du	ring the last 3	years, have y	ou lived anywhere	other than where you liv	re now?	
	1 No					
_ -	4	f the places y	ou lived in the last	3 years. Do not include v	where you live now.	
	'					
	Debtor 1:			Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
					Same as Debtor 1	Same as Debtor 1
	3718 Hemloc	k Street			_	_
	Number Stree	t		From <u>03/01/2011</u>	Number Street	From
				To 06/01/2015		To
	East Chicago	Indiana	46312		City State Zip Code	
	City	State	Zip Code		Oity State Zip Gode	
					Same as Debtor 1	Same as Debtor 1
	8052 S. Woo	ds				_
	Number Stree	t		From <u>06/01/2015</u>	Number Street	From
	-			To 1 <u>2/01/2016</u>	·	То
	Chicago City	Illinois State	Zip Code		City State Zip Code	<u></u>
	Oity	Otate	Zip Oode		Oity State Zip Odde	
	-		-		in a community property state or territory Puerto Rico, Texas, Washington, and Wisco	
_		,	. , , , ,			•
	No Voe Mako eur	o vou fill out C	Schodula H. Vaus C	odobtore (Official Forms	106H)	
Ш	i es. iviake sur	e you iii oul s	onedule n. four C	odebtors (Official Form	100i ij.	

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Johnson

Debtor 1 Robin Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$880.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$22786.00 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$6300.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Est. 2017 YTD LINK \$1,250.00 From January 1 of current year until the date you filed for bankruptcy: Est. 2016 LINK \$7,500.00 For last calendar year: (January 1 to December 31, 2016 Est. 2015 LINK \$7,500.00 For the calendar year before that: (January 1 to December 31, 2015

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Johnson Debtor 1 Robin __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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tor 1	Robin			Joh	nnson	Case number	(if known)
	First Name		Middle Name	Las	t Name	-	
Insi corp age	ders include your porations of which	relatives; a n you are a for a busin	ny general partners n officer, director, p ess you operate as	; relatives of any e erson in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? you are a general partner; g securities; and any managing c domestic support obligations,
~	No						
百	Yes. List all pay	ments to a	an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
_	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
insi Incl	der?		for bankruptcy, d		y payments or trans	fer any property o	n account of a debt that benefited an
M		ments that	benefited an insi	der.			
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name						mode oreanor o marie
	Number Street						
-	City	State	Zip Code				
	Insider's Name						
	Number Street						
							The state of the s

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Debtor 1 Robin Johnson Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property 2012 Chevrolet Sonic 02/22/2017 \$0 Santander Consumer USA Creditor's Name Explain what happened PO Box 961245 Number Street Property was repossessed. Property was foreclosed. Fort Worth 76161 Texas Property was garnished. State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name **Explain what happened** Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	tor 1 Robin	Johnson	Case number (if known)	
	First Name Middle Name	Last Name		
11.	Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because yo		pank or financial institution, set off any am	ounts from your
	✓ No Yes. Fill in the details.			
		Describe the action th	e creditor took Date action was taken	Amount
	Creditor's Name			-
	Number Street			
		Last 4 digits of account	number: XXXX-	
	City State Zip Code			
12.	Within 1 year before you filed for bankruptcy, was a appointed receiver, a custodian, or another official		possession of an assignee for the benefit o	f creditors, a court-
	✓ No ☐ Yes			
Part	5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy, did	you give any gifts with a t	otal value of more than \$600 per person?	
	No Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift			
	Number Street			
	City State Zip Code			
	Person's relationship to you			
	Person to Whom You Gave the Gift			
	Number Street			
	City State Zip Code Person's relationship to you			
	• •			

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	or 1	Robin	Johnson	Case number (if known)	
		First Name Middle Name	Last Name		
14.	Wit	hin 2 years before you filed for bankruptcy	y, did you give any gifts or contri	butions with a total value of more th	an \$600 to any charity?
	V	No			
	H	Yes. Fill in the details for each gift or conti	ribution		
	Ш	-	inbution.		
		Gifts or contributions to charities	Describe what you con		
		that total more than \$600		contri	buted
		Charity's Name			
		Number Street			
		Trained Chool			
		City State Zip Code			
		,			
Part	6:	List Certain Losses			
15.	Wi+	hin 1 year before you filed for bankruptcy	or since you filed for hankrunto	did you lose anything because of th	aeft fire other disaster or
15.		nbling?	or since you med for bankrupte,	, and you lose anything because of th	ieit, iiie, otilei uisastei, oi
	_				
	✓	No			
		Yes. Fill in the details.			
	_	Describe the property you lost and	Describe any insuranc	e coverage for the loss Date of	of your Value of property
		how the loss occurred		insurance has paid. List loss	lost
				s on line 33 of <i>Schedule</i>	1-2-1
			A/B: Property.		
					
Part	7:	List Certain Payments or Transfers			
		hin 1 year before you filed for bankruptcy, out seeking bankruptcy or preparing a ban		n your behalf pay or transfer any pro	perty to anyone you consulted
	abo	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepar No	kruptcy petition?		perty to anyone you consulted
	abo	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepar	kruptcy petition?		perty to anyone you consulted
	abo	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepar No	kruptcy petition?	or services required in your bankruptcy.	perty to anyone you consulted ayment Amount of
	abo	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepar No	kruptcy petition? ers, or credit counseling agencies f	or services required in your bankruptcy.	ayment Amount of
	abo	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepar No	kruptcy petition? ers, or credit counseling agencies f Description and value	or services required in your bankruptcy. of any property Date p	ayment Amount of sfer payment
	abo	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepar No Yes. Fill in the details. Semrad Law Firm	kruptcy petition? ers, or credit counseling agencies f Description and value	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	nut seeking bankruptcy or preparing a banude any attorneys, bankruptcy petition preparence. No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid	kruptcy petition? ers, or credit counseling agencies f Description and value transferred	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street	kruptcy petition? ers, or credit counseling agencies f Description and value transferred	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	nut seeking bankruptcy or preparing a banude any attorneys, bankruptcy petition preparence. No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid	kruptcy petition? ers, or credit counseling agencies f Description and value transferred	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street	kruptcy petition? ers, or credit counseling agencies f Description and value transferred	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor	kruptcy petition? ers, or credit counseling agencies f Description and value transferred	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603	kruptcy petition? ers, or credit counseling agencies f Description and value transferred Attorney's Fee - 1103.24	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor	kruptcy petition? ers, or credit counseling agencies f Description and value transferred Attorney's Fee - 1103.24	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603	kruptcy petition? ers, or credit counseling agencies f Description and value transferred Attorney's Fee - 1103.24	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address None	kruptcy petition? ers, or credit counseling agencies f Description and value transferred Attorney's Fee - 1103.24	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address	kruptcy petition? ers, or credit counseling agencies f Description and value transferred Attorney's Fee - 1103.24	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address None	kruptcy petition? ers, or credit counseling agencies f Description and value transferred Attorney's Fee - 1103.24	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address None Person Who Made the Payment, if Not You	kruptcy petition? ers, or credit counseling agencies f Description and value transferred Attorney's Fee - 1103.24	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address None	kruptcy petition? ers, or credit counseling agencies f Description and value transferred Attorney's Fee - 1103.24	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address None Person Who Made the Payment, if Not You	kruptcy petition? ers, or credit counseling agencies f Description and value transferred Attorney's Fee - 1103.24	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address None Person Who Mas Paid	kruptcy petition? ers, or credit counseling agencies f Description and value transferred Attorney's Fee - 1103.24	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address None Person Who Mas Paid	kruptcy petition? ers, or credit counseling agencies f Description and value transferred Attorney's Fee - 1103.24	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid	Pers, or credit counseling agencies for credit counseling agen	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address None Person Who Mas Paid	Pers, or credit counseling agencies for credit counseling agen	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid	Pers, or credit counseling agencies for credit counseling agen	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade
	abo	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address None Person Who Mas Paid Number Street Value of the payment, if Not You Person Who Was Paid Number Street City State Zip Code	Pers, or credit counseling agencies for credit counseling agen	or services required in your bankruptcy. of any property Date p or tran was ma	ayment Amount of sfer payment ade

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ebtor 1	Robin		Johnson	Case number (if known)	
	First Name	Middle Name	Last Name		
hel	chin 1 year before you file p you deal with your cree not include any payment o	ditors or to make paym	ents to your creditors?	our behalf pay or transfer any property to	anyone who promised to
✓	No Yes. Fill in the details.				
			Description and value of a transferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid				
	Number Street				
	City State	Zip Code			
Inc	ordinary course of your lude both outright transfers that you have all No Yes. Fill in the details.	s and transfers made as s	security (such as the granting of	a security interest or mortgage on your prope	rty). Do not include gifts
			Description and value of a property transferred	Describe any property or payments received or debts in exchange	Date paid transfer was made
	Person Who Received Tr	ansfer			
	Number Street				
	City State Person's relationship to y	•			
	Person Who Received Tr	ansfer			
	Number Street				
	City State Person's relationship to y	•			
ber	thin 10 years before you the triciary? ese are often called asset-p		d you transfer any property to	a self-settled trust or similar device of wh	ich you are a
✓	No Yes. Fill in the details.				
			Description and value of	the property transferred	Date transfer was made
	Name of trust				

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Debtor 1 Robin Johnson Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code

City

State

Zip Code

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Johnson Debtor 1 Robin Case number (if known) Middle Name First Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Debt	tor 1				Johnson	Case no	umber (if kno	wn)		
		First Name		Middle Name	Last Name					
26.		e you been a party No	y in any judic	ial or administr	ative proceeding under	r any environmental	l law? Inclu	ıde settleme	ents and orde	rs.
	П	Yes. Fill in the det	ails.							
					Court or agency	1	Nature of t	he case		Status of the case
		Case title								Pending
					Court Name					On appeal
		Case number			NumberStreet					Concluded
					City State	Zip Code				_
Part	11:	Give Details Ab	oout Your E	Business or Co	onnections to Any Bu	ısiness				
27.	With	nin 4 years before	you filed for	bankruptcy, did	l you own a business or	have any of the foll	lowing con	nections to	any business	?
		A member of A partner in a An officer, di	f a limited liab a partnership rector, or ma	oility company (L o naging executiv	ade, profession, or othe LC) or limited liability pare of a corporation	artnership (LLP)	time or par	t-time		
		An owner of a	at least 5% c	of the voting or e	quity securities of a cor	poration				
		No. None of the a	hove annlie	s Go to Part 12						
	넴				details below for each l	husiness				
	ш	163. Officer all the	αι αρριγ ασσ	ve and illi in the						
					Describe the nat	ure of the business				umber Do not umber or ITIN.
		Business Name			_			EIN:		
		Number Street			Name of account	ant or bookkeeper		Dates busine	ess existed	
		City	State	Zip Code				rom	To	
					Describe the nat	ure of the business				umber Do not umber or ITIN.
		Business Name			_		E	EIN:		
		Number Street			_			Dates busine	ess existed	
					Name of account	ant or bookkeeper				
		City	State	Zip Code			·	rom	To	
					Describe the nat	ure of the business				umber Do not umber or ITIN.
		Business Name			_		[EIN:		
		Number Street			_			Dates busine	ass axistad	
		Namber Street			Name of account	ant or bookkeeper		Jacos Busille	JOJ CAIGIGU	
		City	State	Zip Code	_		·	rom	To	

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Deb	otor 1 Robin		Johnson	Case number (if known)
	First Name	Middle Name	Last Name	
28.	Within 2 years before you file creditors, or other parties.	ed for bankruptcy, did yo	ou give a financial stateme	nt to anyone about your business? Include all financial institutions,
	Yes. Fill in the details bel	ow.		
	_		Date issued	
	Name		MM/DD/YYYY	
	Number Street		_	
	<u> </u>	7: 0 !	_	
	City State	e Zip Code		
Part	t 12: Sign Below			
1	true and correct. I understand a bankruptcy case can result	that making a false sta in fines up to \$250,000,	tement, concealing proper	ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	/s/ Robin Signature of D			Signature of Debtor 2
	Signature of L	ebtori		· ·
	Date 2/22/20	17		Date
ı	Did you attach additional page	es to Your Statement of	Financial Affairs for Individ	luals Filing for Bankruptcy (Official Form 107)?
	✓ No			
İ	Yes			
ı	Did you pay or agree to pay so	meone who is not an at	torney to help you fill out b	ankruptcy forms?
	✓ No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:					
Debtor 1	Robin	Johnson			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Sankruptcy Court for the:	Northern	District of Illinois (State)		
Case number (If known)			(State)		

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Did you claim the property Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Santander Consumer USA Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 2012 Chevrolet Sonic Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debto	r Robin		Johnson	Case number (if	_
1	First Name	Middle Name	Last Name	known)	-
Part 2:	List Your Unexpire	ed Personal Property Leas	es		
inform	ation below. Do not list		leases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).	
De	escribe your unexpired	personal property leases		Will the lease be assumed?	
Le	essor's name:			□ No □ Yes	
	escription of leased operty:				
Le	essor's name:			□ No □ Yes	
	escription of leased operty:				
Le	essor's name:			□ No □ Yes	
	escription of leased operty:				
Le	essor's name:			□ No □ Yes	
	escription of leased operty:			<u>—</u>	
Le	essor's name:			□ No □ Yes	
	escription of leased operty:			<u>—</u>	
Le	essor's name:			□ No □ Yes	
	escription of leased operty:			_	
Le	essor's name:			□ No □ Yes	
	escription of leased operty:			_	
Part 3:	Sign Below				_
Und	-		my intention about any	property of my estate that secures a debt and any personal	
_	/s/ Robin Johnson		x _		
5	Signature of Debtor 1		Sig	gnature of Debtor 2	
[Date 2/22/2017 MM/DD/YYYY		Da	tte MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

		Northern Distri	Ct of illinois	
In re	Robin Johnson		Case No.	
	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF C	OMPENSATIO	N OF ATTORNEY F	OR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed compensation paid to me within one yearendered or to be rendered on behalf of	ar before the filing of the	petition in bankruptcy, or agreed to	o be paid to me, for services
	For legal services, I have agreed to acce	ept		\$1,103.24
	Prior to the filing of this statement I have	ve received		\$1,103.24
	Balance Due			\$0.00
2.	The source of the compensation paid to	o me was:		
	✓ Debtor	Other (specify)		
3.	The source of the compensation paid to	o me is:		
	✓ Debtor	Other (specify)		
4.	I have not agreed to share the above members and associates of my law		n with any other person unless the	ey are
	I have agreed to share the above-di members or associates of my law fi the people sharing in the compens	rm. A copy of the agreeme		
5.	In return for the above-disclosed fee, I had a. Analysis of the debtor's financial bankruptcy;	nave agreed to render lega al situation, and rendering	I service for all aspects of the bank advice to the debtor in determinin	kruptcy case, including: ng whether to file a petition in
	b. Preparation and filing of any pe	tition, schedules, stateme	nts of affairs and plan which may b	pe required;
	c. Representation of the debtor at	the meeting of creditors a	nd confirmation hearing, and any	adjourned hearings thereof;
6.	By agreement with the debtor(s), the ab	ove-disclosed fee does no	ot include the following services:	
		CERTIFIC	ATION	
	certify that the foregoing is a complete stor(s) in this bankruptcy proceedings.	statement of any agreemer	nt or arrangement for payment to r	me for representation of the
	2/22/2017		/s/ Amy Gerstein	
	Date		Signature of Attorney	
			Semrad Law Firm	
	_		Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Johnson, Robin Debtor(s)	Case No	
		Chapter.	Chapter7
	VERIFICA	ATION OF CREDITOR MAT	RIX
T knowledge	he above named Debtors hereby verify t e.	hat the attached list of creditors is tru	ue and correct to the best of their
Date:	2/22/2017	/s/ Johnson, Robi Johnson, Robin Signature of Debt	

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA, GA, 30301

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

ALLIANCEONE 6565 Kimball Dr Gig Harbor, WA, 98335

NIPSCO PO Box 13013 Merrillville, IN, 46411

ATLANTIC CRD P O BOX 13386 ROANOKE, VA, 24033

GE Capital Retail Bank PO Box 4571 Carol Stream, IL, 60197

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN, 55164

Direct TV PO Box 5007 Carol Stream, IL, 60197

TRUST REC SV 541 OTIS BOWEN DRI MUNSTER, IN, 46321

CBE GROUP 131 TOWE PARK DR SUITE 1 WATERLOO, IA, 50702

Comcast p.o. box 196 Newark, NJ, 07101 CREDIT MANAGEMENT LP PO Box 118288 Carrollton, TX, 75011

Comcast One Comcast Center Philadelphia, PA, 19103

HARVARD COLLECTION 4839 ELSTON AVE CHICAGO, IL, 60630

Englewood Garden Apartments 6956 S. Vincennes Ave. Chicago, IL, 60621

KOMYATTECASB 9650 GORDON DRIVE HIGHLAND, IN, 46322

HARRIS 111 WEST JACKSON B SUITE 400 CHICAGO, IL, 60604

Peoples Gas 200 E. Randolph Chicago, IL, 60601

GINNY'S INC 1112 7TH AVE POB 2816 MONROE, WI, 53566

WOW PO Box 4350 Carol Stream, IL, 60197

Commonwealth Edison 3 Lincoln Ctr Attn: Bankruptcy Department Oakbrook Ter, IL, 60181

American InfoSource LP (agent for US Cellular) PO Box 248838 Oklahoma City, OK, 73124 TMobile P.O. Box 742596 Cincinnati, OH, 45274

Sprint P O Box 629023 El Dorado Hills, CA, 95762

Brother Loan 7621 63rd St Summit Argo, IL, 60501

AAA Financial Services P.O. Box 15137 Wilmington, DE, 19886

Holy Cross Hospital Po Box 2154 Bedford Park, IL, 60499

St Catherine's Hospital 4321 Fir St East Chicago, IN, 46312

University of Chicago Medical Center 800 E. 55th St. Chicago, IL, 60615

TCF - Corporate 1405 Xenium Ln N Ste 180 Minneapolis, MN, 55441

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC, to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I agree to pay The Semrad Law Firm, LLC \$1,103.24 in attorney fees plus costs in the amount of \$396.76 to represent my interests in the preparation and filing of my Chapter 7 Petition and Schedules; preparation and attendance of the Section 341 Meeting of Creditors; review of any redemption agreements; review of any reaffirmation agreements; and case administration and monitoring. I further understand and agree that additional professional legal services will result in fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representing Client in Adversary Proceeding. \$300.00/hr.

Adding additional bills \$31.00

Motion to Reopen and Avoid Lien \$1000.00

Motion to Reopen \$350.00 + court costs

I understand that these fees must be paid before such work will be completed. I acknowledge and agree that as the above additional fees constitute post-petition services,

they are not dischargeable in my Chapter 7 case.

I also understand that, unless otherwise agreed, my Chapter 7 bankruptcy case will not be filed until I pay the attorney fees in full. As The Semrad Law Firm, LLC will begin to work on my file immediately after entering into this contract; I understand that any and all funds paid are not refundable.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay the balance of any unpaid fees to The Semrad Law Firm, LLC. Any fees owing to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy may be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay unpaid fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw representation in the event that I do not sign a second retainer after filing my case promising to pay said fees or in the event that I do not pay said fees.

I understand that any funds that I am tendering to The Semrad Law Firm, LLC, as part of this advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm. I further understand that it is ordinarily my option to deposit funds with an attorney that shall remain my property as security for future services. However, The Semrad Law Firm, LLC, does not

Robin Johnson Matter Number 508474-001 Initial: _____RJ

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represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. I further understand that the benefit that I am receiving under this fee arrangement is the commitment of The Semrad Law Firm, LLC, to perform any and all work reasonably necessary to file my case absent any extraordinary circumstances.

As The Semrad Law Firm, LLC, has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC. This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.*

I also understand that, if I am refiling a case with The Semrad Law Firm, LLC, and an audit of the previous case(s) indicate that remaining attorney fees are owed; any initial funds I pay to refile will first be applied to the balance owed on the previous case(s). If client breaches this agreement, client will be responsible for all costs associated with enforcing the terms of this contract including but not limited to court costs and attorney fees.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC, or an agent thereof.

Date: 02/22/17	
Dalin Jahnson	, Robin Johnson
	, Attorney

*DISCLAIMER

The creditors listed in your bankruptcy petition will receive notice of your bankruptcy filing from the Clerk of the United States Bankruptcy Court. Please be advised that it will be several days before these creditors receive the notice. Therefore, if you are concerned about a particular creditor taking immediate action against you, contact this creditor directly and provide the creditor with a copy of your Notice of Bankruptcy Filing. This is especially important if you are at risk of having you vehicle repossessed, real estate foreclosed, or wages garnished.

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Debtor 1 Robin First Name		Johnson	Case number (if known)			
	Middle Name estions for Reporting Purposes	Last Name				
16. What kind of debts do you have?	160. Are your debte primarily engagement debte? Canaumay debte are defined in 11115 C \$101(9) as					
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fundamental No.	7. Do you estimate that a		y is excluded and administrative editors?		
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,00 10,001-25,0	0	25,001-50,000 50,001-100,000 More than 100,000		
19. How much do you estimate your assets to be worth?		Answerd .	Smer	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
^{20.} How much do you estimate your liabilities to be?	□ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	Revassed	Control	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Part 7: Sign Below	11		(a £	-fti		
For you	of title 11, United States Code. I under Chapter 7. If no attorney represents me and out this document, I have obtain I request relief in accordance wit I understand making a false stat connection with a bankruptcy caboth. 18 U.S.C. §§ 152, 1341, 1	apter 7, I am aware tha I understand the relief of I did not pay or agree ned and read the notice th the chapter of title 1 ement, concealing pro- ase can result in fines to	t I may proceed, if eligit available under each character to pay someone who is required by 11 U.S.C. 1, United States Code, perty, or obtaining morup to \$250,000, or impossible to \$250,000.	ble, under Chapter 7, 11,12, or 13 hapter, and I choose to proceed is not an attorney to help me fill § 342(b). specified in this petition. hey or property by fraud in risonment for up to 20 years, or		
e - - - -	Executed on 2/22/2017 MM / DD		Executed on	MM / DD / YYYY It was not not a state of the following the state of		

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Debtor 1	Robin		Johnson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)			(State)	

Declaration About an Individual Debtor's Schedules

If two married people are filing together, both are equally responsible for supplying correct information.

Check if this is an amended.filing

12/15

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Part 1: Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?	
✓ No	
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration Signature (Official Form 119).	n, and
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	
* /s/ Robin Johnson Q ob Jalm	
Signature of Debtor 1 Signature of Debtor 2	
Date 2/22/2017 Date	

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Debtor 1 Robin			Johnson	Case number (if known)
First Nam	6 	Middle Name	Last Name	
	ars before you filed for r other parties.	bankruptcy, did	you give a financial stater	nent to anyone about your business? Include all financial institutions,
☑ No	I to the second of the feet of			
Yes. Fi	l in the details below.			
			Date issued	
Name			MM/DD/YYYY	_
Numb	er Street		_	
City	State	Zip Code		
Part 12: Sign I	Dalou			
a bankruptcy	case can result in fine	s up to \$250,000	, or imprisonment for up t	erty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature of Debtor			Signature of Debtor 2
	Date 2/22/2017			Date
Did you attac	h additional pages to Y	our Statement o	of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
√ No				
Yes Yes				
Did you pay o	r agree to pay someon	e who is not an a	ittorney to help you fill ou	t bankruptcy forms?
√ No				
Yes. Nam	e of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debto	r Robin		Johnson	Case number (if	
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpir	red Personal Property Leases	3		
informa	ation below. Do not li	property lease that you listed in S st real estate leases. Unexpired I nal property lease if the trustee d	eases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).	
De	scribe your unexpire	Will the lease be assumed?			
,Le	ssor's name:			☐ No ☐ Yes	
	scription of leased operty:				
Le	ssor's name:			No Yes	
	scription of leased operty:				
Le	ssor's name:	ras vers som som menne men stå en er en		No No Yes	
	scription of leased operty:				
Le	ssor's name:		agen proposed supplication of the control of the co	No Yes	
	scription of leased operty:				
Le	ssor's name:			□ No □ Yes	A 1000 A
	scription of leased operty:				000000000000000000000000000000000000000
Le	ssor's name:		aggiven a lamenia mento e si alconacionementame medidabello	□ No □ Yes	1000
	scription of leased operty:				
Le	ssor's name:			□ No □ Yes	
	scription of leased operty:				0.0000000000000000000000000000000000000
	Sign Below				
		I declare that I have indicated m o an unexpired lease.	y intention about any	property of my estate that secures a debt and any personal	
_	/s/ Robin Johnson Signature of Debtor 1	Dali Jh	X Sig	gnature of Debtor 2	
Ε	Date 2/22/2017 MM/DD/YYYY		Dat	MM/DD/YYYY	

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Johnson, Robin	Case No	
	Debtor(s)	Case Ivo.	
		Chapter.	Chapter7
	VERIFIC	CATION OF CREDITOR MAT	ΓRIX
. Th knowledge	ne above named Debtors hereby verify e.	that the attached list of creditors is to	rue and correct to the best of their
Date:	2/22/2017	/s/ Johnson, Ro	opin Dati Lik
		Johnson, Robin Signature of De	

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Debtor 1 Robin First Name	Middle Name	Johnson Last Name	Case number (if	(known)	
i ii st i vanie	wildlie Name	Last Name	Column A Debtor 1	Column B Debtor 2 or non-filing spe	ouse
8.Unemployment compensation Do not enter the amount if you a under the Social Security Act. In:	contend that the amount r	eceived was a benefit	\$0.00		
For you		\$0.00			
For your spouse		\$0.00			
 Pension or retirement income benefit under the Social Security 	Act.		\$0.00		,
10.Income from all other source amount. Do not include any ben payments received as a victim of international or domestic terrorisi page and put the total below.	refits received under the So f a war crime, a crime agair	cial Security Act or st humanity, or			
Other Government Assistance			\$625.00		
Total amounts from separate page	ges. if any.		+\$0.00	+	
y o tal all o o no no o o parado par	geo, a., , ,				
11. Calculate your total current each	monthly income. Add lin	es 2 through 10 for	\$2,404.05	+	\$2,404.05
column. Then add the total for	r Column A to the total for	Column B.			
					Total current
Part 2: Determine Whether t	he Means Test Annlie	es to You			monthly income
12. Calculate your current month					
12a. Copy your total current mo	-	onom wroco stope.	Co	py line 11 here ->	\$2,404.05
Multiply by 12 (the number	r of months in a year).				X 12
12b. The result is your annual in	• •	rm.			12b. \$28,848.60
13 Calculate the median family in	ncome that applies to yo	u. Follow these steps:			
Fill in the state in which you live.	Section of the state of the sta	Illinois			
Fill in the number of people in yo	our household.	4			
Fill in the median family income thousehold.	for your state and size of				13. \$90,080.00
To find a list of applicable median instructions for this form. This list					
14. How do the lines compare?					
14a. 🔽 Line 12b is less than or Go to Part 3.	r equal to line 13. On the t	op of page 1, check box	1, There is no presumption	of abuse.	
14b. Line 12b is more than Go to Part 3 and fill ou		e 1, check box 2, The pre	sumption of abuse is deten	mined by Form 122A	-2.
Part 3: Sign Below					****
By signing here, I declare under	penalty of perjury that the	information on this state	nent and in any attachmen	ts is true and correct.	
🗴 /s/ Robin Johnson 🕹	Zah Jeh	*			
Signature of Debtor 1	7		Signature of Debtor 2		· · · · · · · · · · · · · · · · · · ·
Date 2/22/2017 MM/DD/YYYY		ι	Date 2/22/2017 MM/DD/YYYY		
If you checked line 14a, do N If you checked line 14b, fill ou					
			Season was a season of the sea		management and the contract of